

259
260



March 4, 2010

**Statement
Of
Anthem Blue Cross and Blue Shield
On
SB 259 An Act Concerning Insurance Coverage for Mammograms
And
SB 260 An Act Concerning Health Insurance Coverage for Routine Patient Care Costs For Clinical
Trial Patients**

Good afternoon Senator Crisco, Representative Fontana and members of the Insurance Committee, my name is Christine Cappiello and I am the Director of Government Relations for Anthem Blue Cross and Blue Shield in Connecticut. I am on testifying on SB 259 An Act Concerning Insurance Coverage for Mammograms and SB 260 An Act Concerning Health Insurance Coverage for Routine Patient Care Costs For Clinical Trial Patients.

We are concerned about SB 259 and SB 260 because they seek to add a new mandate for all individuals and group policies, including the State of Connecticut State Employees Health Insurance Plan. Mandates remove any choice that employers or individuals might have in purchasing health care. Our goal as a managed care organization is to provide a comprehensive meaningful set of benefits to individuals and employers purchasing our product. How we accomplish this goal changes as the needs and desires of the market changes. Mandating benefits take away the flexibility insurers have in developing products in response to the needs of the marketplace. The cost of mandates may cause the purchasers of health care, specifically employers to stop offering health insurance all together.

I would also like to add that SB 260 has a potentially large cost because of the number of clinical trials that are currently underway and that people are enrolled in disabling, progressive or life-threatening diseases. An argument could be made that almost every disease could fit into these categories and subsequently substantially increase the cost of this mandate.

Thank you for the opportunity to speak on these bills and welcome any questions you may have.